shortcomings. Jim Jones also managed to legitimize the group among some conventional religious and political leaders by supporting their public events and contributing money to their causes during the years when the Peoples Temple was based in San Francisco.

How could so many people find themselves hoodwinked to varying degrees, letting themselves even be linked with this deviant community, much less joining its ranks and sacrificing their lives?

Mr. Speaker, it is a hard question to confront. And the Peoples Temple example teaches us most dramatically not to be seduced by easy answers. It is left to historians and specialists in mass psychology to piece together and place in context the puzzle of Jonestown, the rise of Fascism in Europe, and any number of other instances in which a twisted and charismatic individual has found ways to exploit the weaknesses of large groups and to destroy their will.

As John Ross Hall wrote in one of the definitive studies of Jonestown, Gone From the Promised Land, ''We hear the screams, but we do not entirely understand them, and we will continue to wrestle with the apocalypse they unveiled.''

And I would add, we will continue to commemorate the victims, and to pay tribute to their lives. Mr. Speaker, I would like to ask for a moment of silence here in this chamber to remember our fallen colleague, my predecessor representing the San Francisco Peninsula in Congress, Leo Ryan, and to honor his work for justice and human rights.

SPECIAL ORDERS

The SPEAKER pro tempore (Mr. NEUGEBAUER). Under the Speaker's announced policy of January 7, 2003, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

H.R. 876, THE LOCAL RAILROAD REHABILITATION AND INVESTMENT ACT

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Kansas (Mr. MORAN) is recognized for 5 minutes.

Mr. MORAN of Kansas. Mr. Speaker, I rise tonight on behalf of thousands of America's rural communities, and I would like to focus attention on a looming crisis within our Nation's transportation infrastructure. Short line railroads, rural America's link to the national rail network, are approaching a crisis point.

Before the rail industry was deregulated, Federal policy created a tremendous investment disincentive whose repercussions can still be felt today. With America's generation of heavier rail cars, which many short lines cannot accommodate, this situation has grown worse. We must move quickly, because thousands of miles of track are in danger of being abandoned forever.

Over 550 short line rail carriers now operate 30 percent of the Nation's rail network. Short line railroads exist in all 50 States and in over 70 percent of all congressional districts. They operate 50,000 miles of track, employ over 23,000 workers at an average wage of $47,000, and earn $3 billion in annual revenue.

Today, this local service is threatened due to the introduction of heavier 286,000 pound railcars that have become a new industry standard. Because of the interconnectivity of our Nation's rail network, short lines are forced to use these heavier cars, placing an added strain on track structure and making rehabilitation urgent. Studies indicate that it will take $7 billion in new investment for our Nation's short lines to accommodate these heavier railcars. To keep our constituents connected with the national rail network, these lines must be upgraded. Unfortunately, the small railroad revenue is insufficient to get the job done.

Today, our Nation's short line railroads need help to make the capital investment required to maintain and rebuild rail service between rural and urban America. This is why I introduced H.R. 876, the Local Railroad Rehabilitation and Investment Act. This legislation has enjoyed bipartisan support with, currently, 178 cosponsors. H.R. 876 provides a $10,000-per-mile tax credit as an offset for rehabilitation investments needed to maintain and strengthen local rail service. This temporary incentive program provides a valuable tool for our railroads to rebuild and improve as they work to meet our Nation's increasing shipping needs.

Short line railroads play an important role in my home State of Kansas. Kansas ranks second in the Nation in the amount of farm products it ships out of State by rail. These railroads keep our farmers and small businesses connected to a national rail network. However, since 1980, approximately 2,500 miles of short line rail in Kansas have been abandoned.

In my State alone, the loss of short line railroads would add nearly $50 million in annual repair costs to the State's highway system. The loss of short line rail service could also add over $20 million to the annual cost of transporting and handling the State's wheat harvest, which would result in an annual net decline in farm income of over $17 million. Nearly every State and every congressional district would experience similar consequences without short line rail service.

Congress should have a strong interest in preserving the freight connection between rural and urban America, because once track is abandoned, odds are it will never be replaced. In today's world, a disruption of the network that carries our food, raw materials, and the fuel for our power plants can be ill afforded. Tens of thousands of jobs in agriculture, manufacturing, refining, and mining in almost every congressional district depend upon this service. I urge my colleagues to join me in cosponsoring this vital transportation infrastructure legislation, and I ask the leadership of this Congress to bring this bill forward.

PHARMACEUTICAL PROMOTION AND PROFITS PROTECTION ACT

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Oregon (Mr. DEFAZIO) is recognized for 5 minutes.

Mr. DEFAZIO. Mr. Speaker, Christmas has come early for the pharmaceutical and insurance industries, and it is going to be presented as a very large and complex piece of legislation that as yet no rank and file Member of Congress, no Democrat on this side of the Hill, has been able to review, and it will be voted on later this week.

It is being cast as simply a pharmaceutical benefit for seniors and some sort of a revision of Medicare to make it competitive and so on and so forth. But what it really is is legislation that was written by and for the pharmaceutical and insurance industries, the most powerful lobbies in this country and the most generous of campaign contributors, particularly to the President and the Republican Party; and it is first and foremost designed to protect their profits. In fact, perhaps we should call it the ''Pharmaceutical Promotion and Profits Protection Act.'' That would be an apt title.

Boston University School of Public Health has analyzed the bill and they said, 61 percent of the benefits will flow as increased profits to the pharmaceutical industry. The bill specifically prohibits the Government of the United States of America, on behalf of America's seniors and, indeed, all of the American people, to do anything to lower the extortionate price of prescription drugs in the United States. In fact, it closes the door on the importation of prescription drugs from Canada, which is the only relief that many Americans are able to find today. Oh, they say, well, we do not close the door; we are going to give the authority to the Secretary of Health and Human Services to certify whether or not American-manufactured, FDA-approved pharmaceuticals that have had a short vacation in Canada, where their price goes down by 50 percent or more, would be safe if they flowed back into the United States. And, of course, the Secretary of Health and Human Services, in his wisdom, has already said that he will not find them to be safe, just to reassure the industry. So they will give him a power which he will not use, or which he has already arbitrarily decided.

In fact, it is arguable that the chain of custody of drugs in Canada is safer than in the United States of America, and it would be arguable that, in fact, those drugs would be safer than those that are sometimes made available in the system here because of unregulated, unlicensed pharmacies, and phoney, closed-door pharmacies and other things that were exposed recently in a series by the Washington Post. But nonetheless, we are going to act to protect here, and what we are really protecting, the Congress will vote, and I am sure the House will vote; the President is proposing and the conference committee has proposed to protect the profits of the pharmaceutical industry.

Then, not to leave out the insurance industry, because they are almost as generous in their campaign contributions, we are going to set up a new market for them where we will subsidize the private health insurance industry to create competition. Now, is that not ironic?

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The only industry in the United States of America exempted from antitrust law, an industry which can, and does, legally fix prices, collude with their so-called competitors, and, you know, collude also to determine who they might cover or not cover, we are going to bring about competition by subsidizing them.

There are quite a few seniors in my district that have a rather bitter taste in their mouths about the HMO Medicare+Choice and all these other foolhardy things that have been levied upon them. Those companies walked away one day and left them high and dry. And under this bill they will be able to walk away again and leave people high and dry or they will be able to choose the people they want to cover and tell the rest of them to go over to the Medicare fee-for-service plan which will be more expensive. It will get ever more expensive because all the low-risk people will be moved out and taken by the insurance industry and these subsidized plans until they become high risk, until they have to actually file a claim. That is the way the insurance industry works in America today: they will cover you until you ask them to cover something that you have been paying premiums for. And the next time renewal comes up, sorry, we will not renew you. This does not go on just in health care; it is going on in homeowners and car insurance and everything else. But it is particularly egregious in the area of health care. This bill is going to do nothing to rectify that problem.

Let us look at what the great benefits will be. In the first year, next year, there will be discount cards that will come out before the election so the President can say he did something for people, which will be to give a discount, maybe as much as 15 to 25 percent. That means that seniors will only have to pay 50 to 75 percent more than they would have to pay for those drugs imported from Canada. Oh, what a benefit that is. No, but it is a wonderful windfall for the pharmaceutical industry. They will still be paying prices higher than people covered by other private insurance plans, as are Federal employees, as am I, Blue Cross/Blue Shield, and many others; but they will get that juicy 15 to 25 percent discount.

Then the big plan kicks in in 2007. Why 2007? Because people, if it went into effect sooner, if it was such a great deal, people might figure out what a turkey it is before the next election. So they will dangle it out there 4 years in the future and say this will be really great, you just wait. It is so complicated, few people can figure it out. But here are a couple of numbers. A person who pays $1,000 for pharmaceuticals under this great plan would only pay $945 for their pharmaceuticals after they did their premiums and copayments and deductibles. They would get a benefit of $55 on an annual $1,000 prescription drug benefit.

Well, let us look at someone who has much bigger costs. Someone who pays $3,700, $300 a month. Their benefit would be a grand total of $855. Only about, you know, half of that they could get purchasing the drugs from Canada. This is a sham.

MEDICARE LEGISLATION

The SPEAKER pro tempore (Mr. NEUGEBAUER). Under a previous order of the House, the gentleman from Ohio (Mr. BROWN) is recognized for 5 minutes.

Mr. BROWN of Ohio. Mr. Speaker, this summer AARP devised a litmus test for Medicare legislation. Specifically, AARP said Congress must be careful not to pass any legislation that jeopardizes employer-sponsored retiree benefits, or that leaves such large gaps in the drug coverage that seniors still will not be able to afford needed medicines, or that includes a premium support privatization provision which will invariably give HMOs control over Medicare, or undercuts popular support for the Medicare program by requiring higher-income beneficiaries to pay more for the same coverage. In other words, we should not pass any legislation that introduces means testing into Medicare.

The Medicare conference committee agreement that was outlined this weekend still jeopardizes employer-sponsored retiree coverage for 12 million seniors. In other words, as many as a third of the seniors who now have prescription drug coverage will lose it under this bill because employers will say why should we do it, we will put you in that government program.

It still leaves such huge gaps in coverage the average senior will run out of drug benefits by August each year. Understand that the average senior will run out of drug benefits two-thirds of the way through the year, but, get this, will still be required to pay the premiums through December. That is a great deal.

It still includes a premium support provision that stacks the deck so resolutely against Medicare fee-for-service, the Medicare that seniors in this country respect and love and have benefited so greatly from. It stacks the deck so resolutely against the Medicare fee-for-service program that seniors will have no choice but to join a private insurance HMO. And it still means tests seniors.

What else does this bill do? It creates a $12 billion slush fund for HMOs to induce them to provide coverage. If anyone still believes privatizing Medicare will reduce health care costs, this $12 billion bribe going to the insurance industry from U.S. taxpayers, this $12 billion bribe should cure them of that misperception.

Mr. Speaker, there is no surprise here. After all, the insurance industry gives tens of billions of dollars to my friends on the other side of the aisle, to President Bush, to Vice President CHENEY, to Republican legislative leadership. This bill also increases drug profits by nearly 40 percent, an estimated $139 billion over 8 years. Again, no surprise there, Mr. Speaker. The drug industry gives actually tens and tens of billions of dollars to President Bush. The word on the street in Washington is they may give $100 million to President Bush's reelection. So, of course, they are going to look out for the drug industry.

Coincidentally, this bill specifically prohibits the Federal Government from negotiating lower prices on behalf of seniors and taxpayers to secure lower drug prices. It abandons the one strategy that would deliver meaningful drug savings to seniors, businesses, and all prescription drug purchasers. It abandons legislation that my friend, the gentleman from Minnesota (Mr. GUTKNECHT), who is in this Chamber, worked on; the gentleman from Washington (Mr. MCDERMOTT); the gentleman from New Jersey (Mr. PALLONE); the gentleman from Arkansas (Mr. ROSS); the gentleman from Texas (Mr. GREEN); the gentlewoman from California (Ms. WOOLSEY), a lot of us on both sides of the aisle worked on. It abandons legislation to allow importation of prescription drugs, safe, affordable prescription drugs from Canada and other countries that charge one-third, one-fourth, one-fifth as much as they do in the United States.

Other countries negotiate for lower drug prices, but the U.S. is a passive drug taker. As a result, U.S. consumers get robbed; the drug industry gets rich. This bill ignores public support for prescription drug reimportation from other countries for lower price, the same drug but for lower price, ignores the consequences for consumers, for employers, and for the Federal Treasury if we fail to bring drug prices down.

Seniors cannot afford the high cost, employers cannot afford the high cost, taxpayers cannot afford the high cost of prescription drugs anymore in this country.

If anyone still believes the drug industry and the insurance industry are not the ghost writers of this bill and are not its principal beneficiaries, perhaps the $12 billion HMO slush fund, the $139 billion in additional drug industry profits, the prohibition on negotiated drug prices, and the stifling of prescription drug importation just might convince you.

One more thing. While the drug and insurance industries fair extremely well under this legislation, the bill's